BEST AVAILABLE COPY

10/795 950

CLAIMS ONLY									Application Number				Filing Date			
									Applicant(s)							
<u> </u>							* May be used for additional claims or amendments									
CLAIMS	AS FILED AFTER FIRST AFTER SI					SECOND	T	way be used for additional claims of amendments								
			AMENDMENT		AMENDMENT		L									
	Indep	Depend	Indep	Depend	Indep	Depend	-		Indep	Depend	Indep	Depend	Indep	Depend		
1 2					<u> </u>		ŀ	51 52						$\vdash \lnot \lnot$		
3		',					ŀ	53								
4		1						54								
5							H	55 56					ļ	\vdash		
7					 -		ŀ	57						 		
 8 		- /- -						58								
9		1						59						 		
10					ļ	\vdash	-	60 61				 	 	\vdash		
11		,	 			 	ا, ا	62				 				
13		,					į	63				ļ <u> </u>				
14		1					- [64				 	ļ			
15			 			 	ŀ	65 66					 	\vdash		
16 17		,	 				ŀ	67								
18		1					Į	68								
19		/			ļ <u>. </u>		ŀ	69 70								
20 21							ŀ	71								
22		' ,					į	72			ž ·					
23								73					<u> </u>	 		
24				ļ. — — —	 		ŀ	74 75				 				
25 26		 	 				.	76								
27								77								
28								78 79					 			
29 30		<u> </u>					ŀ	80								
31		 					ŀ	81								
32								82				·		ļ		
33					ļ	 		83 84					 			
34· 35		<u> </u>	 		 	 	. I	85								
36			<u> </u>				į	86								
37							l [87						 		
38 39		 	<u> </u>			├──┤	\ \ \	88 89				 	 	 		
40		 	 		-	 	l	90								
· 41								91						ļ		
42		ļ			 	 	∣ ŀ	92 93					 	 		
43				 		 	∣ ŀ	93								
45		<u> </u>						95				ļ				
46								96						 		
47		 	 	ļ		 		97 98				 		\vdash		
48.		 	 -	 	 		ŀ	99								
50							Ĺ	100								
Total		1						Total				11				
Indep Total				<u>.</u>	-	<u>.</u>]	 	Indep Total	4				—	ا لــا		
Depend	-		•					Depend				·		,		
Total		T						Total								
Claims		<u></u>	<u> </u>	L	<u> </u>	<u> </u>		Claims	L				L			